Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/05 (4/98)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attomey Docket No. S30.12-0006 UTILITY First Inventor or Application Identifier Mira Krsistina LaCous PATENT APPLICATION Title TRUSTED BIOMETRIC DEVICE TRANSMITTAL Express Mail Label No. EV 178019245 US (Only for new non-provisional applications under 37 C.F.R. § 1.53(B)) Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents Address To: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 \boxtimes *Fee Transmittal Form e.g., PTO/SB17) CD-ROM or CD-R in duplicate, large table or 1. (Submit an original and a duplicate for fee processing) Computer program (Appendix) X2. Applicant Claims small entity status Nucleotide and/or Amino Acid Sequence Submission 8. X Specification .[Total Sheets 34 / (If applicable, all necessary) (preferred arrangement set forth below - Descriptive title of the Invention) a. ☐ Computer Readable Copy - Cross References to Related Applications b. Specification Sequence Listing on: - Statement Regarding Fed sponsored R & D i. CD-ROM or CD-R (2 Copies); or - Reference to Microfiche Appendix ii. Paper - Background of the Invention - Brief Summary of the Invention C. Statement verifying identity of above copies - Brief Description of the Drawings (if filed) - Detailed Description **ACCOMPANYING APPLICATION PARTS** - Claim(s) 9. \mathbf{X} Assignment Papers (cover sheet & document(s)) - Abstract of the Disclosure 37 C.F.R. § 3.73(b) Statement ▼ Power of 10 (when there is an assignee) Attorney 11. English Translation Document (if applicable) \boxtimes Drawing(s) (35 U.S.C. § 113) [Total Sheets 9 Information Disclosure ☐ Copies of IDS 4. 12. Statement (IDS)/PTO - 1449 Citations Oath or Declaration 13. **ITotal Sheets Preliminary Amendment** 5. Return Receipt Postcard (MPEP 503) 14. a. Newly executed (original or copy) (Should be specifically itemized) b. Copy from a prior application (37 C.F.R. § 1.63(d)) Certified Copy of Priority Document(s) 15. (for continuation/divisional with Box 18 completed) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Nonpublication Request Under 35 USC 122 16 Signed statement attached deleting (b)(2)(B)(i). Applicant must attach form PTO/SB/35 inventor(s) named in the prior application, or its equivalent see 37 C.F.R. §§1.63(d)(2) and 1.33(b). \boxtimes Other: Checks for the filing fee; extra 6 17. claims, and assignment recordation Application Data Sheet. See 37 CFR 1.76 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an 18. Application Data Sheet under 37 CFR 1.76: □ Continuation Divisional ☐Continuation –in part (CIP) of prior application No: _ Prior application information: Examiner Group/Art Unit: FOR CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 17. CORRESPONDENCE ☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Christopher L. Holt Name WESTMAN CHAMPLIN & KELLY Suite 1600 - International Centre Address 900 South Second Avenue Minneapolis MN 55402-3319 City State Zip Code USA (612) 334-3222 (612) 334-3312 Country Telephone Fax Christopher L. Holt Name (Print/type) Registration No. (Attorney/Agent) 45,844 Wristoppor L. Ho Signature 7/24/03

Complete if Known						
FEE TRANSMITTAL	Applic	ation N	0.			
	Filing	Filing Date			HEREWITH	
	First I	First Named Inventor			Mira Kristina LaCous	
	Title	Title			TRUSTED BIOMETRIC DEVICE	
•	Group	Group Art Unit				
	Examiner Name					
Total Amount of Payment \$ 669	Atty. Docket Number			-	S30.12-0006	
METHOD OF PAYMENT (Check One)		FEE CALCULATION (Continued)				
The Director is hereby authorized to charge any additional fee	3. ADDITIONAL FEES					
required under 37 C.F.R. § 1.16 and 1.17, including any petition fee,	Large	Large Entity Small Entity				
and credit any over payments to Deposit Account No. <u>23-1123</u> . Westman, Champlin & Kelly, P.A.	Fee	Fee	Fee	Fee		Fee Description Fee
2. Check Enclosed	Code	(\$)	Code	(\$))	, ala
	1051	130	2051	e	65	Surcharge - Late filing fee or oath
FEE CALCULATION	1052	50	2052	2	25	Surcharge - Late provisional Filing Fee or cover sheet
1. BASIC FILING FEE	1053	130	1053	13	30	Non-English specification
Large Entity Small Entity	1812	2,520	1812	2,52	20	For Filing a Request for Reexamination. (ex parte)
Fee Fee Fee	1251	110	2251	5	55	Extension for reply within first month
Code (\$) Code (\$) Fee Description	1252	410	2252		05	Extension for reply within second month
1001 750 2001 375 区 Utility Filing Fee	1253	930	2253		65	Extension for reply within third month
1002 330 2002 165 ☐Design Filing Fee	1254	1,450	2254		25	Extension for reply within fourth month
1004 750 2004 375 ☐Reissue Filing Fee	1255	1,970	2255		85	Extension for reply within fifth month
1005 160 2005 80 ☐Prov. Filing Fee	1402	320	2402	16	60	Filing a brief in support of an appeal
Subtotal (1) \$ 375	1403	280	2403	14	40	Request for oral hearing
2. EXTRA CLAIM FEES	1814	110	2814	5	55	Terminal Disclaimer Fee
Number Prior** Extra Fee from Fee Paid	1452	110	2452	5	55	Petition to Revive - unavoidable
Claims Below						
Total 48 20 28 9 252	1453	1,300	2453	65	50	Petition to Revive - unintentional
Indep 4 3 1 42 42	1501	1,300	2501	65	50	Utility/Reissue issue fee (inc. advance copies)
Multiple Dependent Claims	1502	470	2502	23	35	Design issue fee (inc. advance copies)
** Insert 3 and 20, or number previously paid if greater; Reissue see below	1460	130	1460	13	30	Petitions to the Commissioner
Large Entity Small Entity Fee Fee Fee Fee Description <u>Code (\$) Code (\$)</u>	1807	50	1807	5	50	Petitions related to provisional applications
1202 18 2202 9 Claims in excess of 20	1806	180	1806	40	80	Submission of Information Disclosure
1201 84 2201 42 Independent claims in excess of 3	1000	100	1000	10	00	Statement
1203 280 2203 140 Multiple Dependent Claims	8021	40	8021	4	40	Recording each patent assignment per
1204 84 2204 42 Reissue Independent Claims over Original Patent						property (times number of properties)
1205 18 2205 9 Reissue claims in excess of 20 and over original patent	Other I	Fee (speci	ify)			
Subtotal (2) \$ 294						Subtotal (3) \$

Signature Christopher L. Holt)

Date 7/24/03

Reg. No. 45,844

Deposit Account No. 23-1123